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APPLICANTS

CESAR Z. LINA, UNIVERSAL CITY, TX;

** CONTINUING DATA *****

This application is a CON of 08/816,807 03/19/1997 PAT 5,989,204
 which is a CON of 08/428,268 04/25/1995 ABN
 which is a CON of 08/275,920 07/14/1994 ABN
 which is a CON of 08/000,545 01/04/1993 ABN
 which is a CON of 07/766,576 09/27/1991 ABN

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/02/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 2	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature Initials				

ADDRESS

30159
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TITLE

FOOT MOUNTED VENOUS COMPRESSION DEVICE

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of
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